

Non-Emergency Medical Transportation: Case Scenarios





NC Medicaid





County Playbook: Medicaid Managed Care





Non-Emergency Medical Transportation Case Scenarios





The following Non-Emergency Medical Transportation (NEMT) case scenarios are designed to demonstrate how the NEMT process will work under managed care.





- **Medicaid Managed Care Members:** receive NEMT services from their health plan.
- **Medicaid Direct Beneficiaries:** receive NEMT services from their County Department of Social Services (DSS).





 CASE SCENARIO	 NEMT POLICY GUIDANCE	 KNOW	 ACTION
1. Medicaid Managed Care member requires transportation assistance to a medical appointment.	<p>Medicaid Managed Care –</p> <p>Health plan NEMT requirements are outlined in Section V. Scope of Services beginning on page 118 of 221 in Contract #30-190029-DHB Prepaid Health Plan Services.</p> <p>Each health plan has a NEMT Policy that specifies:</p> <ul style="list-style-type: none">• transportation options available• how to request transportation• driver and vehicle requirements	<p>The health plan is responsible for transporting enrolled members to medically necessary appointments.</p> <p>The health plan must provide NEMT services in an amount, duration and scope no less than what is provided to beneficiaries in Medicaid Direct program (i.e., Medicaid Fee-For-Service).</p> <p>If the member has additional needs not outlined in policy, the health plan is responsible for addressing those needs as part of the assessment.</p>	<p>Under managed care, members should call their health plan member services line for NEMT assistance.</p> <p>Some health plans may have additional ways to receive transportation assistance. NEMT contact information can be found in the NEMT Fact Sheet Part II.</p>





 CASE SCENARIO	 NEMT POLICY GUIDANCE	 KNOW	 ACTION
	<ul style="list-style-type: none"> assessment process to determine means and mode member rights and responsibilities hours of operation <p>The health plan Member Handbook provides guidance on accessing NEMT covered service.</p>	<p>Members that disagree with health plan NEMT determinations may follow the Grievance and Appeal process.</p>	
<p>2. Medicaid Managed Care member is a child and requires transportation assistance to a medical appointment.</p>	<p>Medicaid Managed Care –</p> <p>Same as Case Scenario #1</p>	<p>Health plan is required to ensure that an attendant is present with members under the age of eighteen (18), unless emancipated, at no additional cost to the member or attendant. The attendant may or may not be the child's parent.</p>	<p>The parent/guardian contacts the child's health plan for transportation assistance. The parent/guardian will need to indicate additional individuals that will accompany the child to the visit.</p>
<p>3. Medicaid Managed Care member with special needs requires transportation assistance to a medical appointment.</p>	<p>Medicaid Managed Care –</p> <p>Same as Case Scenario #1</p>	<p>Health plan is required to ensure that an attendant is present with members with special medical, physical or mental impediments, at no additional cost to the member or attendant. The attendant may or may not be the member's parent.</p>	<p>The attendant or parent contacts the member's health plan for transportation assistance. The attendant or parent will need to indicate additional individuals that will accompany the member to the visit and any special needs that the member may have.</p>
<p>4. Two Medicaid children, one enrolled with a Health Plan and one enrolled in Medicaid Direct, require transportation assistance to a medical appointment on the same day at different locations. The same parent needs to accompany both children.</p> <p>Example: Parent and both children need to go on all trips in one day. The Medicaid Direct beneficiary's appointment is first and health plan member's appointment is second.</p>	<p>Medicaid Managed Care –</p> <p>Reference the Health Plan Contract #30-190029-DHB Prepaid Health Plan Services Section V. Scope of Services page 119 of 221. <i>The health plan shall guarantee the following rights to members: (See bullet ii.) To be informed of who may accompany a member without cost.</i></p>	<p>Both the health plan and the County DSS are responsible for the transportation to and from the appointment for their member/beneficiary and accompanying persons and/or attendant(s).</p>	<p>The parent should contact both the County DSS and the health plan to coordinate transportation for each of the child's appointments and identify any accompanying individuals. Efforts to coordinate transportation requests for these children between the health plan and the County DSS is expected.</p> <p>Example: <u>Scheduling the Trip:</u></p> <ol style="list-style-type: none"> 1. Parent calls the County DSS to arrange for transportation for the first appointment and identifies all accompanying individuals. 2. Parent calls the health plan to arrange for transportation to





 CASE SCENARIO	 NEMT POLICY GUIDANCE	 KNOW	 ACTION
			<p>the second appointment and identifies all accompanying individuals.</p> <p><u>The Actual Trip:</u></p> <ol style="list-style-type: none"> 1. County DSS provides transportation for both children and the adult to the Medicaid Direct beneficiary's appointment. 2. Health plan provides transportation for both children and the adult to the Medicaid Managed Care member's appointment.
<p>5. Two Medicaid children, one enrolled with a health plan and one enrolled in Medicaid Direct, require transportation assistance to a medical appointment on the same day at the same location. The same parent needs to accompany both children.</p>	<p>Medicaid Managed Care –</p> <p>Same as Case Scenario #4.</p>	<p>Same as Case Scenario #4.</p>	<p><i>Only the health plan will be contacted.</i></p> <p>The parent/guardian contacts the member/child's health plan for transportation scheduling.</p> <p>The parent/guardian will need to indicate additional individuals that will accompany the member to the visit.</p> <p>The health plan will transport the Medicaid Direct child at no additional cost. However, the Medicaid Direct beneficiary will not be logged in the health plan's encounter information as the health plan does not have access to the Medicaid Direct beneficiary's information.</p>
<p>6. NC Health Choice member, enrolled in a health plan, requires transportation assistance to a medical appointment.</p>	<p>Medicaid Direct Policy –</p> <p>See MA 2910 II. B. 3; MA 3550 IV. C. 3. NC Health Choice beneficiaries are not eligible for transportation services.</p> <p>Medicaid Managed Care –</p>	<p>NEMT is <u>NOT</u> a covered benefit for NC Health Choice members unless offered by the health plans as a Value-Added Service.</p>	<p>The member's parent/guardian contacts the health plan member services department to see if there are NEMT services available for NC Health Choice members.</p>





 CASE SCENARIO	 NEMT POLICY GUIDANCE	 KNOW	 ACTION
	See Contract #30-190029-DHB Prepaid Health Plan Services Section V. C. Table 7: Individuals Not Eligible to Receive NEMT Services (page 119 of 221).		
7. Medicaid Managed Care member, currently in a nursing facility for less than 90 days, requires transportation assistance to medical appointment.	<p>Medicaid Direct Policy –</p> <p>See MA 2910 II. B. 4; MA 3550 IV. C. 4. Nursing home beneficiaries – the facility is responsible for providing transportation to their patients.</p> <p>Medicaid Managed Care –</p> <p>See Contract #30-190029-DHB Prepaid Health Plan Services Section V. C. Table 7: Individuals Not Eligible to Receive NEMT Services (page 119 of 221).</p>	<p>The health plan will cover the medical services for the member, but the facility is responsible for providing transportation for their patients.</p>	<p>Coordination for NEMT and the transport is completed by the facility.</p>
8. Medicaid Managed Care member is an adult and requires transportation assistance to a medical appointment.	<p>Medicaid Managed Care –</p> <p>See Contract #30-190029-DHB Prepaid Health Plan Services - NEMT requirements are delineated in Section V. Scope of Services beginning on page 118 of 221.</p> <p>See Contract #30-190029-DHB Prepaid Health Plan Services - Each health plan has an NEMT Policy that delineates the following: transportation options available to members; methods and process by which to request transportation; driver and vehicle requirements; process for transportation assessment; member rights and responsibilities and hours of operation.</p> <p>The health plan Member Handbooks should provide guidance on accessing NEMT covered service.</p>	<p>The health plan is responsible for transporting the member to their medical appointments.</p>	<p>Members call their health plan's member services line to request NEMT.</p>

 CASE SCENARIO	 NEMT POLICY GUIDANCE	 KNOW	 ACTION
<p>9. Medicaid Managed Care member is an adult and requires travel related expenses (e.g., transportation, food, parking fees/tolls, lodging, and mileage) for a medical appointment.</p>	<p>Medicaid Direct Policy –</p> <p>See MA 2910 XII. Reimbursement. XII.E.2. The local agency has the option of providing money for travel-related expenses to the beneficiary in advance or after the trip is completed</p> <p>Medicaid Managed Care –</p> <p>See Contract #30-190029-DHB Prepaid Health Plan Services – <i>The health plan shall provide travel-related expenses. And [members are] to be transported to medical appointments if unable to arrange or pay for transportation and by means appropriate to circumstances.</i></p> <p>The health plan Member Handbook provides guidance on accessing NEMT covered service.</p>	<p>The health plan is responsible for providing all medically necessary travel-related expenses, including:</p> <ul style="list-style-type: none"> • Lodging • Food • Parking fees/tolls • Transportation vouchers including taxis, ride sharing services, public transit • Mileage 	<p>The member calls their health plan member services line to receive NEMT assistance.</p> <p>If the member is unable to arrange or pay for transportation, the health plan will provide the necessary mode and means to transport the member appropriate to their circumstances.</p> <p>Upon trip request, the health plan will provide information regarding NEMT reimbursement process, in the event the member pays for their expenses up front.</p>
<p>10. Medicaid Managed Care member is an adult and requires travel-related expenses (e.g., transportation, food, parking fees/tolls, lodging, and mileage) for a medical appointment. Member's minor child needs to accompany the member to the appointment.</p>	<p>Medicaid Direct Policy -</p> <p>See MA 2910 VII.d.2.b When arranging transportation that is suitable to the needs of the beneficiary: Determine if there are any special factors impacting the trip. This may include attendant responsibilities, accompaniment of children, public transportation schedule incompatible with appointment and/or conflicting work schedules.</p> <p>MA 2910 XII. D. 1. All attendants, including family members, are entitled to reimbursement of expenses incurred during transportation at the least expensive rate that is appropriate to the beneficiary's circumstances, including reimbursement for return trips with or without the beneficiary.</p>	<p>The health plan is responsible for providing all medically necessary travel-related expenses for the <u>member and accompanying child</u>, including:</p> <ul style="list-style-type: none"> • Lodging • Food • Parking fees/tolls • Transportation vouchers including taxis, ride sharing services, public transit • Mileage 	<p>The member calls their health plan member services line to receive NEMT assistance. Member is responsible for notifying the health plan if they have a child accompanying them.</p> <p>If the member is unable to arrange or pay for transportation, the health plan will provide the necessary mode and means to transport the member appropriate to their circumstances.</p> <p>Upon trip request, the health plan will provide information regarding NEMT reimbursement process, in the event the member pays for their expenses up front.</p> <p>Note: The parent/guardian is responsible for providing</p>

 CASE SCENARIO	 NEMT POLICY GUIDANCE	 KNOW	 ACTION
	<p>Medicaid Managed Care –</p> <p>See Contract #30-190029-DHB Prepaid Health Plan Services – <i>The health plan shall provide travel-related expenses. And [members are] to be transported to medical appointments if unable to arrange or pay for transportation and by means appropriate to circumstances.</i></p> <p>The health plan Member Handbooks should provide guidance on accessing NEMT covered service.</p>		<p>necessary/safety equipment (e.g., child car seats or booster seats).</p>
<p>11. Two Medicaid Managed Care members, adult enrolled with Health Plan A and dependent child enrolled with Health Plan B, require transportation assistance to medical appointments on the same day at different locations</p>	<p>Medicaid Direct Policy –</p> <p>If a parent must bring minor children to the medical appointment, they will be transported as accompanying individuals.</p> <p>Medicaid Managed Care –</p> <p>See Contract #30-190029-DHB Prepaid Health Plan Services references to care coordination and NEMT (pages 118 – 120).</p>	<p>Each health plan is responsible for transporting enrolled members to medically necessary appointments and to accommodate any necessary accompanying individuals.</p> <p>The health plan is required to make necessary accommodations as well as ensure care coordination with NEMT services.</p>	<p>Medicaid Managed Care adult calls each health plan member services line (Health Plan A and Health Plan B) to receive NEMT assistance for themselves and their accompanying child.</p> <p>The Medicaid adult should specify details of their health plan and appointment and their Medicaid managed care child's health plan and appointment.</p> <p>Each health plan will ask clarifying questions when talking to the member to coordinate transportation requests for these members appropriately.</p>
<p>12. Two Medicaid Managed Care members, Medicaid child 1 in Health Plan A and Medicaid child 2 in Health Plan B, require transportation assistance to a medical appointment on the same day, same location, and same transportation broker.</p>	<p>Same as Case Scenario #11</p>	<p>Same as Case Scenario #11</p>	<p>Same as Case Scenario #11</p>

 CASE SCENARIO	 NEMT POLICY GUIDANCE	 KNOW	 ACTION
<p>13. Two Medicaid Managed Care members, Medicaid child 1 in Health Plan A and Medicaid child 2 in Health Plan B, require transportation assistance to a medical appointment on the same day, same location, and different transportation brokers.</p>	<p>Same as Case Scenario #11</p>	<p>Same as Case Scenario #11</p>	<p>Same as Case Scenario #11</p>
<p>14. Medicaid Managed Care member attends medical appointment and immediately following visit needs to go to the pharmacy or another provider prior to returning home.</p>	<p>Medicaid Direct Policy –</p> <p>See MA 2910. X.A.3 Urgent transportation services are exempt from any advance notice requirement. The local agency must try to satisfy any urgent request for transportation.</p> <p>Medicaid Managed Care –</p> <p>See Contract #30-190029-DHB Prepaid Health Plan Services – <i>The health plan shall not require Members to make transportation requests more than two (2) days in advance (see page 119). Urgent transportation services are exempt from any advance notice requirement (see page 120).</i></p> <p>The health plan Member Handbooks should provide guidance on accessing NEMT covered service.</p>	<p>The health plan is responsible for transporting the member to their medical appointments, including visits to other locations such as pharmacies or other Medicaid providers to meet medical needs.</p> <p>The health plan is required to make necessary accommodations.</p>	<p>This would be considered an urgent transportation request, and the health plan member, their representative, or provider is required to contact the member's health plan member services to request modification of transportation request.</p>
<p>15. Medicaid Managed Care member needs to make an urgent trip request after normal business hours.</p>	<p>Same as Scenario #14.</p>	<p>Same as Scenario #14.</p>	<p>This would be considered an urgent transportation request, and the health plan member, their representative, or provider should contact the health plan member services to request an after-hours urgent trip request.</p>
<p>16. Medicaid Managed Care member is in a county that experiences a natural disaster.</p>	<p>Medicaid Managed Care –</p> <p>See Contract #30-190029-DHB Prepaid Health Plan Services Section V.C.3.c.d.iv.h The health plan shall</p>	<p>The health plan is responsible for transporting the member to their medical appointments, including visits to other locations, such as pharmacies or other</p>	<p>The member calls their health plan's member services line in need of NEMT during/following natural disaster.</p>

 CASE SCENARIO	 NEMT POLICY GUIDANCE	 KNOW	 ACTION
	<p>develop and maintain an Emergency Preparedness Protocol, consistent with Clinical Coverage Policy 9: Outpatient Pharmacy, to prevent a significant disruption in medication access during a state of emergency or disaster.</p>	<p>Medicaid providers to meet medical needs.</p> <p>The health plan is required to make necessary accommodations, in the event of a natural disaster.</p>	
<p>17. Medicaid Managed Care member does not get picked up at their scheduled time (NEMT provider no-show).</p>	<p>Medicaid Managed Care –</p> <p>See Contract #30-190029-DHB Prepaid Health Plan Services – <i>The health plan shall guarantee the following rights to members: (see bullet vii) To arrive at provider in time for scheduled appointment.</i></p> <p>The health plan Member Handbook provides guidance on accessing transportation assistance as well as member rights and responsibilities (e.g., grievance or appeal).</p>	<p>The health plan is responsible to transport the member to their medical appointments and must ensure the member arrives on time for the appointment, but no sooner than one (1) hour before the appointment; nor must wait more than one (1) hour after the conclusion of the treatment for transportation home; nor be picked up prior to the completion of treatment.</p>	<p>The member should contact their health plan through the <i>Where's My Ride</i> contact number.</p>
<p>18. Medicaid Managed Care member calls the County DSS with a concern over pick-up (i.e., – pick-up did not occur)</p>	<p>Same as Scenario #17.</p>	<p>Same as Scenario #17.</p>	<p>County DSS should direct member to call their health plan.</p>
<p>19. Medicaid Managed Care member is having behavioral issues during scheduled trip(s).</p>	<p>Medicaid Direct Policy –</p> <p>See MA 2910.VI.B. and MA 3550 V. Beneficiary Rights and Responsibilities</p> <p>See MA 2910 X.C. and MA 3550 VII. G. H. Conduct Policy (some scenarios may result in suspension of service, however, during that time the beneficiary may still receive gas vouchers or mileage reimbursement)</p> <p>Medicaid Managed Care –</p> <p>The health plan Member Handbook provides guidance on member rights and responsibilities.</p>	<p>Each health plan will have a NEMT Policy regarding expected member conduct that aligns with current Medicaid Direct policy guidance.</p> <p>In addition, all Medicaid beneficiaries will receive the DMA-5046 that describes in detail their rights and responsibilities related to NEMT and expected behavioral conduct.</p>	<p>While the health plan is responsible for ensuring NEMT providers are trained and educated on behavior issues, the health plan will notify the member regarding unacceptable behaviors exhibited during scheduled trips.</p> <p>Members that disagree with actions taken by the health plan may follow the Grievance and Appeal process.</p>

 CASE SCENARIO	 NEMT POLICY GUIDANCE	 KNOW	 ACTION
<p>20. Medicaid Managed Care member has a disability and requires additional assistance to and from the provider's office.</p>	<p>Medicaid Managed Care –</p> <p>See Contract #30-190029-DHB Prepaid Health Plan Services (pages 118-120)</p>	<p>When providing NEMT services, the health plan shall use the most appropriate form of transportation to meet the needs of the member at no additional cost to the member.</p>	<p>The member or parent/guardian calls their health plan member services line to receive NEMT assistance and indicates any special needs that require additional assistance by transportation provider.</p> <p>The health plan will determine the most appropriate form of transportation to meet the needs of the member.</p>
<p>21. Medicaid Managed Care member is a repeat no-show for scheduled trips.</p>	<p>Medicaid Direct Policy –</p> <p>Se MA 2910. X. B and MA 3550 VII. G. No-Show policy.</p> <p><i>[Cancellations less than 24 hours prior to the appt may count as no shows. Third no-show within 3 months of first no-show will result in 30-day suspension. Defines good cause scenarios, which would not count as a no-show. Critical need beneficiaries (such as dialysis and chemo) cannot be denied transportation to these services.]</i></p> <p>Medicaid Managed Care –</p> <p>See Contract #30-190029-DHB Prepaid Health Plan Services, Section 5.f.v.d. <i>[The health plan NEMT policy should include ...] Expected Member conduct and procedures for no-shows.</i></p>	<p>The expected member conduct and procedures for no-shows is at the discretion of the health plan, so long as it is not less restrictive than current Medicaid Direct policy guidance.</p> <p>All Medicaid beneficiaries will receive the DMA-5046 which describes their rights and responsibilities as it relates to NEMT and includes no-show information.</p>	<p>The member is encouraged to contact their health plan as far in advance as possible if a trip modification or cancellation is needed to reduce the number of no-shows.</p> <p>The health plan or their transportation vendor will contact the member if their NEMT services are temporarily suspended due to no-shows. The member has the right to appeal this decision.</p>